The MEDICAL MISSIONARY

Bengali Maids

Vol. VI AUGUST, 1933 No. 9

WASHINGTON

We were given a big surprise and much pleasure—which was all too brief—by a visit from Miss Pauline Willis, of London. This is the first time that Miss Willis has been in America since 1924, when she brought Dr. Dengel over here for the purpose of raising money for the foreign missions. (Here, Dr. Dengel met Father Mathis, C.S.C., and this led to the founding of our Society.) Since that time, Miss Willis has never ceased her interest in all our projects and problems. When the time came for us to expand and establish a house in London, Miss Willis came to our aid and gave us the use of her house in Winchcombe until we were able to purchase the Mater Christi Medical Mission House.

MISS PAULINE WILLIS

As her stay on this side of the water was unavoidably curtailed, she could only give us one day and night. In that short time, however, she gave us the latest news of our little family in Osterley, besides showing the keenest interest in all the angles of the Medical Mission Apostolate here. Before leaving she said: "Well, I must hurry back to England now, and raise some money for the Mater Christi House and for the Holy Family Hospital." Incidentally, Miss Willis never lets her right hand know what her left hand does.

As we can never adequately express our appreciation for all she has done for us, we take this opportunity of thanking God for giving us such a fairy godmother.

The final card party of the season was a great success. It was held on the Medical Mission House grounds at the height of the cherry season—which unfortunately was not as prolific of cherries as usual—on Saturday, June 10.

The morning was cloudy and sultry, but in the afternoon when the party began the sun came out and everyone was glad to seek as much shade as the trees afforded. There were about 15 tables of bridge on the lawn. Tea and cherries were served during the play.

We are very grateful to the committee in charge, especially to Mrs. E. Reinoehl, the president of the Washington Auxiliary; to all who contributed prizes and cake; and also to all those who participated in it, thereby helping to make it the success it was.

RAWALPINDI

As the land on the north side of the Holy Family Hospital was about to be sold in small lots, and as one high building had already somewhat hemmed us in on that side, we were obliged to buy the land. While regretting the necessity of the purchase, we were glad to be proof against further intrusion.

DACCA

Dacca, previously noted for its freedom from disease, is now becoming an unhealthful place. This year there has been a great deal of malignant malaria (a terrible disease in which the sufferer dies very quickly in many cases), besides a real epidemic of all the forms of malaria. This is expected to continue as it is due, they say, to the river's bed drying up.

Another epidemic, that of cholera, which from the last reports seemed to be increasing, caused quite a stir. At the Mitford Hospital there were several admissions a day, with from one to three deaths, daily. The hospital became so overcrowded that bamboo huts were erected for the overflow. Shortly after that had been done, the Hindus had a bathing festival and 51 developed cholera—15 dying on the spot.

There has also been a great deal of severe dysentery, and a very virulent form of measles. The latter has attacked most of those who have withstood the other diseases.

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THE ASSUMPTION OF OUR LADY

THE ASSUMPTION *Murillo*

THE Assumption of Our Lady's body into heaven is the principal feast of Our Lady. Culminating as it did the most perfect life ever lived, or whichever could be lived, on this earth and the most perfect death (excepting, of course, the life and death of Jesus Christ); it is, as Father Martindale expresses it: "The eternal seal set by God upon the history of Mary . . . which began when she spoke the words: 'Behold the handmaid of the Lord: be it done to me according to Thy word.'" It is the glorious result of the Immaculate Conception.

Historically, we know very little concerning this feast. We do not know whether Mary died in Jerusalem or in Ephesus (although it is more generally believed to have taken place in Jerusalem), or if she died three or fifteen years after the death of Christ. In the writings of the East, we find mention of the Assumption in the sermons of St. Andrew of Crete, St. John Damascene, St. Modestus of Jerusalem (6th-7th century) and others. In the West, St. Gregory of Tours mentions it first. St. John Damascene writes: "St. Juvenal, Bishop of Jerusalem, at the Council of Chalcedon (451), made known to the Emperor Marcian and Pulcheria who wished to possess the body of the Mother of God that Mary died in the presence of all the Apostles, but that her tomb when opened, upon the request of St. Thomas, was found empty; wherefrom the Apostles concluded that the body was taken up to heaven." Today, the belief in the corporeal assumption of Mary is universal in the East; and in the West, according to Benedict XIV (De Festis B. V. M., I viii, 18), it is a probable opinion which to deny were impious and blasphemous.

Murillo was primarily the artist of the Assumption. As the Immaculate Conception was a theme which defied material representation, but in which he was more interested (as this doctrine was promulgated in Spain at the time), he chose the Assumption of Our Lady into heaven as its nearest equivalent. He seems never to have been quite satisfied with the result for he painted twenty portraits on this subject. The most famous of these is in the Louvre. To those who have seen it, the coloring, the majesty, yet the simplicity of the Virgin, her beauty and purity are a never-to-be-forgotten delight. The beginning of Father Faber's poem on the Assumption might well be used to describe it, but he takes us farther than paint or canvas well could do. He begins:

"Sing, sing, ye Angel Bands,
All beautiful and bright;
For higher still and higher,
Through fields of starry light,
Mary, your Queen, ascends,
Like the sweet moon at night."

And then:

"O happy angels! look,
How beautiful she is!"

We see Murillo's angels flying all about her and looking lovingly upon her. Here Faber goes beyond the range of Murillo's conception:

"On—through the countless stars
Proceeds the bright array;
And Love Divine comes forth
To light her on her way . . ."

He out-distances the power of brush and palette:

"The Eternal Father calls
His Daughter to be blest;
The Son His Maiden-Mother
Woos unto His Breast;
The Holy Ghost His Spouse
Beckons into her rest.

"Swifter and swifter grows
The marvellous flight of love . . ."

Faber concludes with God proclaiming her "Queen of Immaculate Birth," and then she is crowned and sits forever on her "predestined throne."

While the angels in heaven rejoice, we too rejoice, for Mary's Assumption has not taken her from us but rather has rendered her more powerful as an intercessor—as Faber says in an earlier verse:

(*Continued on page 5*)

The MEDICAL MISSIONARY

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HOLY FAMILY HOSPITAL,

RAWALPINDI,

April 15, 1933.

DEAR SISTER AGNES MARIE:

Are you surprised to see that I am back in Pindi again, even if only for a month? When Dr. Dengel was in Dacca, she said: "This year you must come up to Pindi for a month's vacation."

Just as soon as my lectures came to an end, I, Sister Theresa having packed my bag (for I had so many last-minute jobs), started off with five nurses under my wing. They were going to Calcutta for their final examinations, and we were mutually pleased to have each other's company; although they were travelling "Intermediate" and I was going "Second" as far as Calcutta and then "Inter." on to Pindi.

We left the river boat at Goalunda, a dark, dreary place, and at about 10 p. m. scrambled on the train. I had a huge compartment all to myself, but when I went to see how the nurses were getting along, I found them in a tiny, dark compartment with about six other people and with scarcely any sitting room. It seemed a pity that I should have so much space and they so little. Therefore, I interviewed the guard and I am afraid the recording angel has it down against me that I left him under the impression that I was scared to travel alone at night. The guard held a consultation with another guard and he in turn held a long conversation with a person whom he designated as the "fly-catcher," or was it the "ticket-catcher"—the latter seems more likely. The result was that by paying the small sum of 2 rupees my fears (?) would be quieted by the presence of five little nurses, and they would have a nice place to sleep. They were very much pleased, and purred like five little pussy cats before a fire in winter. I think I did, too, when I saw how much they were enjoying themselves. They sat near the windows for a time, preening themselves, looking with vastly superior eyes upon inferior fellow travellers who were either in "Third" or "Inter. Class."

After bidding the nurses good-bye at Calcutta, I boarded the Delhi Express, bound for Rawalpindi. Ahead of me ensconced in the compartment were two Pathan ladies. They were very beautiful, having the fair complexions of the Pathans, the lovely pink cheeks, the violet eyes. (The Pathans are a very fine but fierce and warlike race of people from Afghanistan.) We, having quite a long time to wait, began a conversation. Suddenly, the big fat husband of one of them, putting his head inside the door, demanded: "Where are you going?" I told him, and asked him whither he was bound. He replied that he was not travelling but his *"bibi"* (wife) was going to Peshawar. I said that I had been there once and added that it was a *"bahut achchha jagah"* (a very nice place). They were immensely pleased at that and immediately presented me with two nice apples. A little later another big fat Mahommedan, a relative, made the women open a basket and two oranges were forced upon me. Presently, another relative made the women hand me four oranges. I began to look like a young fruit shop, and increasingly so as the presents of fruit continued all the way to Pindi.

I asked them if they had a fruit shop. "Yes," they said, proudly, "in New Market." They must have been very rich people, for all kinds of rare, expensive, fruits are to be had from the New Market vendors. I don't think you were ever in New Market, or the *"Naya Bazaar,"* as they call it. What a place it is! It consists of a tremendous covered area containing hundreds and thousands of small shops, arranged in narrow lanes. One enters and immediately: *"Mem-sahib,* what you want? Very nice stockings?" From the next stall: "No, no; mine cheaper!" On all sides: "Nice oranges, very cheap," "Bathtubs here." "This way, *Padre Mem-Sahib"* (on catching sight of the crucifix), "Good egg-beater, nice broom, cheap sausages." . . . (All at once, and all at the top of their voices.) When one meekly states one's need, immediately the whole bazaar rings with it. Consequently, one has to be very careful for what one asks.

To go back to my companions, I must tell you about the children who were with them; one a very good little boy and the other an extremely naughty little girl. Poor wee thing, she hadn't a chance in the world! One moment she was gulping down an orange; the next, two or three bananas; then a big greasy *chapatti* (wheaten bread); and at least every hour she was fed a few ounces of diluted milk or glaxo from a baby's bottle (even though she was about 3 or 4 years old). The mother took great trouble to heat the latter; usually, she set fire to a heap of paper or a bunch of straw. I was really quite alarmed at times for the breeze, caused by the swiftly moving train, sent burning pieces of straw or paper

in all directions. The amusing part was that, after all these preparations, the young lady usually took a glass of ice water within a very short time of drinking the carefully heated milk. The mother had about a hundred-weight of ice tied up in a sack under the seat. One of the ladies calmly proceeded to crack with an iron bar a piece of it which they had placed on top of a very nice leather suit case. I must say I admired the fortitude of the young Anglo-Indian girl to whom it belonged, for she never said a word. Fortunately, a fellow passenger intervened before much damage was done.

As night drew on, the two Pathan ladies decided that they were hungry and proceeded to do some cooking. They pulled out a little stove and laid it nicely with wood and charcoal. In a short time, they had a roaring fire. Perspiration began pouring from us as most of the windows had to be closed to keep the fire within bounds.

When we were approaching Delhi, one of the Pathans said: "Please try to come into our carriage again when we change." I promised to do so; but to tell the honest truth, when I looked at the state of that carriage—orange peels, decaying melons, banana peels, burnt straw and paper, water from the melted ice, water from washing the cooking utensils, refuse from food, etc., and the odor . . . —I felt that after two days of their company (although they were really charming women), I would much prefer to be alone.

SISTER M. LAETITIA

After a few hours' wait at Delhi, our train came in and we found that there was only one small compartment in our "Class." It was made to seat about 12, but 30 of us crowded into it; I was, willy nilly, with my friends again. As we had only room to sit bolt upright the whole night, there was not much chance of their doing any cooking. We could hardly see each other for the stacks of baggage that were piled up almost to the ceiling, but every now and then a whiff of something burning or a blade of blazing straw floating by told me that they were still there.

We were all very thankful when we arrived at Rawalpindi the next afternoon. Here, most of the passengers left the train, which pleased the Pathan ladies very much as they would have all the room they wanted for cooking, etc., on the last lap of their journey.

There was another interesting passenger on the train, a young Mahommedan bride. When she entered the compartment, she was arrayed in a most beautiful silken *burkha,* very finely embroidered. After the train started, she removed this cumbersome garment and stood revealed in wonderful silken trousers and *kurta* (the shirt-like thing which the Punjabi women wear). She wore dozens of expensive golden bracelets, several necklaces of the same precious metal, earrings, nose-rings, finger-rings, toe-rings and goodness knows what all!

She was very much made up with rouge, lipstick and blackened lashes and eyebrows. Her attendant, an extremely garrulous old lady, besought me to tell them a story every few minutes. As morning drew on, this *buri* (old woman) washed the bride's face and hands, combed her hair, and then stuffed a few bites of *chappati* into her mouth. The poor little bride was allowed to do nothing for herself, but seemed very much embarrassed to receive all these attentions in public.

I received a warm welcome in Pindi. It is nice to be back here again.

Dr. Dengel and I are off for the mountains (Murree) tomorrow. After a couple of weeks' rest, Dr. Dengel plans to take the Ford and go with one of the sisters out into the villages. They will live there, Indian fashion, and will remain in a village as long as their medical services are immediately necessary. From Pindi to Kohala (about 60 miles) there is no woman doctor. As the women keep strict purdah, they are without medical help.

I shall write you from Murree.

Yours in J. M. J.,

SISTER MARY LAETITIA, R. N.

THE ASSUMPTION OF OUR LADY

(*Continued from page* 3)

"And shall I lose thee then,
Lose my sweet right to thee?
Ah! no—the angels' Queen
Man's Mother still will be,
And thou, upon thy throne,
Wilt keep thy love for me."

—A. B. C.

WHY GREGORIAN CHANT?

By SISTER M. ELEANOR

ALTHOUGH Gregorian Chant may justly be called the music of the Church, as it is the official form of sacred music which the Church prescribes for its liturgical services, other forms of music are permissible for divine worship as long as they contribute to its dignity. The problem confronting the missionary is which of these types of music, while retaining the splendor of the liturgy, is most adaptable to another people having other customs and culture, and therefore possessing a different kind of appreciation for music.

In order to accommodate ourselves to the musical taste of the people in mission countries, it is necessary to study and to understand their native music. Up to very recent years, it was almost impossible for the missionary to understand and appreciate the music of the natives because in most cases he was not able to study and analyze it scientifically. Now, however, due to the work of anthropologists along this line, the missionary can profit by their findings.

In "Zeitschrift für Missionswissenschaft" (2 Heft, 1927) Theodor Rüehl, S. V. D., gave an account of the conclusions arrived at after studying and comparing the form of music of some mission countries with the forms of music we use for our religious ceremonies. The following is taken from this very interesting article.

Father Rüehl says, in part, that there may be distinguished three different systems of music: the three-tone system, the five-tone system, and the seven-tone system which are built up on a scale of three, five, and seven tones, respectively. In the three-tone and five-tone systems, the tones differ from each other by one whole step, except in some cases when a half-tone occurs as part of a melisma (a melodic figure) or for rhythmic purposes. The seven-tone system, the one on which our modern music is based, contains whole and half steps in the scale.

The three-tone system is found today among some primitive tribes in Central Africa, in Australia, Melanesia, and Tierre del Fuego; also in some Arabian pastoral songs, the Hebrew lamentations; some classical and religious songs of India, in the prayers of Buddhist priests, and in the medicine songs of the Eskimos and South American Indians.

The five-tone system is the one most widely spread. It is found in China, Korea, Japan, India, Annam, Siam, Burma, Sumatra, parts of Africa, and the South Sea Islands.

Arabian music is according to the seven-tone system. From Arabia the seven-tone system spread over Northern Africa, Persia, and India.

We see from the distribution of the three systems that most of the peoples thus studied have either the three-tone or the five-tone system. This means that they do not know the one-half-step intervals which occur in our modern music, and find it almost impossible to master them. For the same reason our hymns sound very foreign to the native ear. Experienced missionaries say that the peoples to whom the five-tone system is native can learn our modern hymns only with the greatest difficulty and after long practice. Even then, when they meet the half-tones "e to f" and "b to c" they go off key or they sing something else.

Another great difference between our modern music and the native music in mission countries is found in the rhythm. Instead of the simple rhythmical units as expressed by our "3/4, 4/4, 6/8," etc., signs, which rigidly measure the accents, there is in the music of other peoples and cultures a much more highly developed rhythm. Our hymns offer a poor substitute for that which the natives are used to. Certainly, they must seem to them very stiff and hide-bound. Moreover, the psychical difference between us and the peoples of other cultures may account for the general lack of appreciation that is shown when a hymn which we consider most beautiful, fails to arouse the emotions of the people in the missions.

The consideration of these facts, and the experience of missionaries in different parts of the field, lead us to the conclusion that it would be a mistake to introduce our modern music in the missions.

In comparing Gregorian Chant with the music of the world, we arrive at a different conclusion. Technically, Gregorian Chant embraces the five-tone and seven-tone systems and has also some music according to the three-tone system (the "Sanctus" of the "Requiem Mass" and most psalms and litanies). Although plain chant also has half-tones, these occur very often in a quilisma and in rhythmical figures. Added to this, the free rhythm of Gregorian Chant is a favorable factor to make it universally understood and appreciated. The experience of missionaries in Africa and Asia, in Australia and Melanesia points to these effects. Plain chant appeals to almost all peoples because it has something in common with their own native music.

Father Rüehl concludes by saying that above all Gregorian Chant is imbued with the spirit of prayer—the spirit of the Catholic Church—and the Catholic mind, both vital factors in Christianizing and sanctifying paganism.

The Society of Catholic Medical Missionaries is a religious community founded for the purpose of bringing medical aid to the foreign mission field. Please address enquiries to: Dr. Anna Dengel, Catholic Medical Mission House, Brookland, Washington, D. C.

DR. AGNES McLAREN

(NOTE—This is the continuation of the abridged translation from the French of the life of Dr. Agnes McLaren, the great pioneer doctor who initiated Catholic Medical Mission Work in the Punjab.)

Synopsis: Dr. Agnes McLaren was the daughter of Duncan McLaren, a Presbyterian, one of the foremost citizens of Edinburgh, and of Priscilla Bright, a Quaker. As a young girl, Agnes was a devoted friend of the poor. At the age of 37 she went to Montpellier to study at the university to become a doctor. After she obtained her medical degree she practiced in Cannes where there was an English colony of some importance. After making a retreat, annually, for 20 years under the direction of a Catholic priest, she finally embraced the Catholic Faith and was baptized on November 30, 1898. In the foregoing chapter, she became a member of the Third Order of St. Dominic.

CHAPTER VIII

Pioneer Medical Missionary Work in India

AGNES McLAREN had a very high idea of the mission of the Christian woman, not only in her own family but in society at large. With the rich treasures of her own mind and heart—her delicate power of observation with regard to persons and things, her refined manners, and when it was necessary, the heroic nature of her self-sacrifice—there were few things in her own line at least of which she was not capable. At this period in her life, Agnes determined to make war on what she called the legal regulating of vice. She was encouraged in her plan by her meditations on the life of St. Agnes of Montepulciano, a virgin of the Dominican Order—therefore, her sister and her model. St. Agnes in order to build her monastery chose a hill of ill repute and so turned it, under the protection of Mary, into a garden perfumed with virtues. To accomplish her object, Agnes McLaren prayed, spoke, wrote, and travelled. At Rome she received from Pope Leo XIII his blessing on her work through the medium of Cardinal Rampolla (April 29, 1899) and that of Pope Pius X in a letter dated November 19, 1905. Dr. Lapponi, the Medical Advisor of His Holiness, also gave her a letter of encouragement and praise. In France, she dared to present her cause before great politicians, even to plead it before Clemenceau—then head of the government.

The result, one must acknowledge, was not great. These encouragements and efforts struck in vain against the tide of licentiousness which was powerful enough to influence the law. She continued, however, to work at her plan in another way, according to the counsels of a Cardinal who realized that the early education in the home is the fundamental factor of the integrity of public morals and a preventive remedy against the corrupting influences of the world. In effect, the parents by their example, their care, their counsels, their corrections inspire the children with a profound respect for themselves and for others and an instinctive aversion for all that might lower the Christian ideal. When these children are grown up and thrown into the world, they without being absolutely invulnerable, would at least be strongly influenced to preserve the traditions of their parents. Agnes was confirmed in this idea by the remembrance of her childhood days when family customs of the most chaste kind were found side by side with the friendly intercourse and gentle intimacies of family life.

About this same time she turned her efforts in another direction: that of creating and organizing groups of women of the world who would try as she did to qualify as women doctors, in order to have the right to practise their art everywhere for the saving of souls and bodies, either working alone or by taking charge of some hospital. As lay women, she thought that they might be able to come in contact more easily with the sick and suffering in the interests of their salvation, and also they would give no cause for complaint to those governments hostile to religious orders. They could without any doubt call in to help them, outside doctors, surgeons, and specialists; but being legally heads of the hospital, they could safeguard the interests of the souls under their care, promote a Christian atmosphere and keep at arm's length all baneful influences.

She wished to have these institutions in every country: in France, where she saw, not without indignation, men coming into power hunting the Sisters from the hospitals and so sacrificing in an inhuman manner the sick poor to their hatred of religion; and above all for England and her possessions in India.

In India she wished to make the first effort in person and so at the age of seventy-two she began by undergoing the fatigues of the long journey. At Rawalpindi, she started a fully equipped hospital and several dispensaries. She chose Rawalpindi because, as Mgr. Wagner of Mill Hill, Prefect Apostolic, wrote in the English Review:

"Experience gathered over a long period of time has convinced us that in this part of India, it is only through the women of India that our Holy Mother the Church can exercise its influence on the people of India and their children; particularly is it absolutely indispensable to have women doctors for the women of Rawalpindi because there only the lower caste women and outcasts, who constitute a minority, would be content to go to men doctors. Knowing the great good accomplished in many of the non-Catholic Missions in different parts of India, I am convinced that it is my duty to establish a similar work, but Catholic in character, in my diocese."

DR. McLAREN
in her later years

He continues: "Before organizing a committee for this great work of charity, Dr. McLaren has consulted the ecclesiastical authorities of Great Britain and has received

the warm approbation of the Primates of England, Ireland, and Scotland.

"Dr. McLaren also had a special audience with the Holy Father; he was deeply interested in the new work and granted a special blessing to all those who would help in it. . . .

"A committee was formed in London and authorized by the Prefect Apostolic to buy two large houses with a plot of land near the Catholic Church, one for the hospital and dispensary, and the other for the staff. One of the staff and her assistant, are doctors of medicine. Some native servants will be employed.

"Dr. McLaren wishing to have exact information on the organization of Catholic Missions went to India at her own expense and stayed there several months, studying the question. She visited about twenty missions and was much edified by all she saw in the hospitals and dispensaries. During her stay in the Orient, Dr. McLaren received approval of her mission from four Archbishops and four Bishops of the Catholic Church and six of these expressed their wish to have similar foundations in their diocese. All of these prelates were of different nationalities; three Italian, one French, two Dutch and one English, or rather Irish. . . ."

The missionary bishop makes but a short reference to the trials and hardships which Agnes endured to prepare and found her work. She herself in her notes mentions that besides the toils of a journey of forty days going and coming, she had to spend 159 hours on the railway, jolting about in quick trains, without counting other ways of traveling on foot and by wheel. She endured attacks of fever, which laid her low in spite of her courage, and a thousand other inconveniences and difficulties.

She opened her hospital under the patronage of St. Catherine of Genoa, a tertiary of the Third Order of St. Francis, who, being a widow, had consecrated her life to the Grand Hospital of Genoa. She placed at its head, Miss Billey, a doctor from Berne and a graduate of Dublin University.

Agnes' journey in India lasted from the autumn of 1909 to the end of the spring of 1910. On her return she wished to make a pilgrimage to Jerusalem. Here she fell ill again. Due to the good care she received, however, she was soon able to return to France.

In order to complete the work she had begun, and with the help of God to extend it to the most needy countries, vocations were wanted, and many of them. With this object in view, she appealed to many generous souls, only to meet with bitter disappointments.

(To be continued)

HIM ONLY

Recognize God's graces to you, and, instead of thinking of yourself and your faults, try to do all you can for God, and love Him more.—Doyle, S.J.

MEDICAL MISSION ACTIVITY IN HOLLAND

In a recent number of the "Medisch Missie Maandblad," the monthly publication of the Dutch Medical Mission Board, Dr. E. H. Hermans, gives an account of the development of the Board's new activity, namely, the collecting of data for composing Medical Mission Statistics.

The great value of such statistics for the medical mission movement in general, and for the missionaries themselves, is evident when one considers the high mortality of missionaries. Often we do not realize to the full what this means, but it is a fact that on the West Coast of Africa lie three hundred missionaries who died before reaching the age of 28 years. This means that they had practically no opportunity to do missionary work. Although they did not die in vain, for God accepted their sacrifice, think of the years of training which were, humanly speaking, wasted.

The fact that 55 of the missionary orders and congregations of Holland are cooperating with the Medical Mission Board to collect the necessary data is a proof that the mission superiors are convinced of the importance of such statistics. Data concerning the general physical health of the missionaries at the time of departure for the missions, their state of health while at work, and the causes of their death, are compiled on standard cards.

Of the 2446 missionaries sent out from 1900-1930 by the contributing orders, 236 (or 9.64%) died between the ages of 20 and 50 years. The mortality rate for the same age in Holland is 5.15%. Of these 236 missionaries, 57.2% died in the following countries: North Africa and Southwest Asia, 18.9%, China and Japan, 23.1%, and West Africa, 15.2%. Tuberculosis, malaria, and typhoid were the greatest enemies of missionary life, causing respectively, 17.7%, 14.9%, and 16.3% of the deaths.

By studying the data thus collected, the Dutch Medical Mission Board hopes to be able to advise the missionaries medically before going out to the field and to help them to preserve their health while working for the good of souls.

Knowing the splendid record of achievements of the Dutch Medical Mission Board and the solidity of its foundation in regard to organization, we trust that this branch of their work will develop more and more for the good of our common cause.

CHRISTENDOM IN DUBLIN. By G. K. Chesterton. Sheed and Ward, N. Y., 1933, $1.00.

This is a magnificent sketch of the glorious pageant of religious faith as it passed in review before any observer at the Eucharistic Congress held in Dublin last June. Mr. Chesterton testifies that the Irish people, as well as a large portion of Christendom, is passionately religious.—*Regis College Review Service, Denver, Colo.*